

## Factsheet 87

# Personal Independence Payment and Disability Living Allowance

April 2017

### About this factsheet

This factsheet gives information about Personal Independence Payment (PIP), a non means-tested benefit for people aged 16 to 64 who have a disability.

The factsheet also gives information about Disability Living Allowance (DLA) which is gradually being replaced by PIP. It covers the process for reassessing existing DLA claimants for PIP and explains what to do for both benefits if you have a change of circumstance.

If you are 65 or over and you have care needs you may be able to claim Attendance Allowance (AA). Please see factsheet 34, *Attendance Allowance* for more information.

The information in this factsheet is correct for the period April 2017 – March 2018. Benefit rates are reviewed annually and take effect in April but rules and figures can sometimes change during the year.

The information in this factsheet is applicable in England, Scotland and Wales. If you are in Northern Ireland, please contact Age NI for information. Contact details can be found at the back of this factsheet.

Contact details for any of the organisations mentioned in this factsheet can be found in the Useful organisations section.

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## 1 What is PIP?

PIP is for people aged between 16 and 64 who need help with daily living activities and/or getting around because of long-term illness or disability. PIP does not depend on NI contributions, is not affected by your income or savings and is paid on top of most other benefits or pensions. It is payable whether you work or not and is not taxable.

It does not matter if you live alone or with other people, nor whether you have a carer or other help. Awards are based solely on whether you satisfy the conditions. You do not have to spend it paying for care, although your local authority may take it into account when assessing whether, and how much, you need to pay for care services received.

## 2 Who qualifies for PIP?

To qualify for PIP, you must:

- not receive DLA (unless transferring from DLA, see section 12)
- not be entitled to Armed Forces Independence Payment
- need help with daily living activities and/or mobility (see section 4)
- be aged 16 or over and under 65 when you first claim
- have satisfied the daily living and/or mobility conditions for at least three months and expect to satisfy them for at least the next nine months (except if you are terminally ill - see section 6.5)
- not be subject to immigration control
- be habitually resident in the UK and been in Great Britain for 104 weeks out of the previous 156 weeks.

The residence rules may not apply to some people, including terminally ill people, members of the armed forces and people who live in or have lived in EEA states or Switzerland.

### 2.1 Rules about your age

Although you must make a PIP claim before you reach 65, once you are awarded PIP, it continues after 65 as long as you continue to satisfy the conditions.

If you have a short break in entitlement (less than 12 months) after the age of 65 and then become entitled again as a result of the same medical condition, you can make a new PIP claim.

### 3 Current rates

PIP has a 'daily living component' and a 'mobility component' with a 'standard rate' and an 'enhanced rate' that can be paid separately or together. Rates for 2017/18:

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#### Daily living component

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Enhanced rate	£83.10
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Standard rate	£55.65
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#### Mobility component

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Enhanced rate	£58.00
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Standard rate	£22.00
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### 4 PIP components

Qualifying for either PIP component depends on an assessment of your ability to perform particular activities related to daily living or mobility. Each activity contains a range of statements (called descriptors), describing various levels of difficulty in doing that activity. Each descriptor scores points from 0 to 12. For each activity, the descriptor that describes your situation most accurately is awarded to you.

The number of points you score for each activity within each component is added up and if you score 8 or more points for at least one component, you qualify for a PIP award.

If a descriptor applies for more than six months in a one year period, you score the points for that descriptor (or the highest scoring descriptor if two or more scoring descriptors apply to you for more than 6 months of the year). If no descriptor applies to you for 6 months of the year, but two or more scoring descriptors added together do, the descriptor that applies most of the time applies, or the highest scoring descriptor where both apply for the same amount of time.

In general, descriptors describe different sorts of help you may need, such as using an aid or appliance, prompting, supervision or assistance. **Assistance** means physical intervention by another person and does not include vocal assistance. **Prompting** is another person reminding or encouraging you to do an activity. **Supervision** means the continuous presence of another person for your safety.

You should not be assessed as able to undertake an activity unaided unless you can do it safely, to an acceptable standard, repeatedly and in a reasonable time period.

Your scores for each of the activities are added together and if your total is between 8 and 11, you are awarded the standard rate of the relevant component. If your total is 12 or more, you are awarded the enhanced rate of the component. If your total score is less than 8 points, you are not awarded that component.

## 4.1 Daily living component

There are ten daily living activities:

- preparing food
- taking nutrition
- managing therapy or monitoring a health condition
- washing and bathing
- managing toilet needs or incontinence
- dressing and undressing
- communicating verbally
- reading and understanding signs, symbols and words
- engaging with other people face to face
- making budgeting decisions.

See section 15 for a full list of activities, descriptors and points.

### Example

The dressing and undressing activity has six descriptors as follows:

<b>Descriptor</b>	<b>Points</b>
a. Can dress and undress unaided	0
b. Needs to use an aid or appliance to be able to dress or undress	2
c. Needs either: (i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed, or (ii) prompting or assistance to be able to select appropriate clothing	2
d. Needs assistance to be able to dress or undress their lower body	2
e. Needs assistance to be able to dress or undress their upper body	4
f. Cannot dress or undress at all	8

If, for example, (d) applies to you for 2 months of the year, (e) for 3 months and (f) for 2 months, then (e) applies and you score 4 points. If (d), (e) and (f) each apply for 3 months of the year, you score 8 points.

### Aids and appliances

Many descriptors assess your ability to do something '*using an aid or appliance*'. This is something that improves, provides or replaces a function: for example walking sticks, modified cutlery and kitchen utensils, grab rails and shower seats. It can include an aid or appliance that is not specifically designed for disabled people, like an electric can opener, if you need it due to your disability rather than through choice. If you do not have a particular aid or adaptation, you may be assessed as if you do, if you could reasonably be expected to use it.

## 4.2 Mobility component

Entitlement to the mobility component is assessed by your ability to perform two activities:

- planning and following journeys
- moving around.

Although the mobility component is awarded because you need help getting around, you can spend it how you choose. It is not usually available if your mobility problems begin after the age of 65. Seek specialist advice if this applies to you.

See section 15 for a full list of the activities, descriptors and points.

## 5 Example of who may be entitled to PIP

### Vicky

Vicky is 62 and was diagnosed with multiple sclerosis five years ago and her husband now supports her full-time. She spends most of her time in an electric wheelchair because she can only walk about 10–15 steps. Although her condition has not changed much over the last 18 months, things are very different from when she was first diagnosed.

Vicky tries to be independent and uses a variety of aids and appliances. Her husband sometimes assists her into the shower, but she can usually do this independently. She has a big walk-in shower cubicle with a seat and once in she can wash without support. However, it takes a very long time as she has poor manual co-ordination.

She has an adapted toilet with a raised seat and grab rails. In the kitchen she uses the microwave but finds it difficult lifting saucepans and cutting up food. She has modified clothes, with Velcro fastenings, so that she can dress herself. They use an adapted car which accommodates her wheelchair when going out.

## Applicable descriptors

### Daily living component

*Preparing food 1E* - Needs assistance to either prepare or cook a simple meal – 4 points

*Taking nutrition 2B(iii)* - Needs assistance to cut up food - 2 points

*Washing and bathing 4B* - Needs to use an aid or appliance to be able to wash or bathe – 2 points

*Managing toilet needs or incontinence 5B* - Needs to use an aid or appliance to manage toilet needs or incontinence - 2 points

*Dressing and undressing 6B* - Needs to use an aid or appliance to dress or undress - 2 points

### Mobility component

*Moving around 2E* - Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided. – 12 points

## Award

Vicky qualifies for enhanced rate daily living component (12 points) and enhanced rate mobility component (12 points).

Note - it could be argued for descriptor 4, *Washing and Bathing*, that Vicky should be awarded a higher scoring descriptor. She can wash herself, but she takes much longer than someone without an impairment. Thus she is unable to do this “*in a reasonable time*”.

However, in Vicky’s case, she has already established entitlement to the enhanced rate and there would be no point in challenging the decision to award her benefit.

## 6 Making a claim

### 6.1 When to claim

A claim can be made up to three months in advance i.e. before you have satisfied the qualifying conditions of having difficulties for three months. You should not delay claiming because it may take some weeks to deal with your claim. Claims for PIP cannot be backdated before the date of your claim. If you are terminally ill, see section 6.5.



## 6.2 How to claim

PIP claims can be made by phone or on a claim form. If you claim by phone, you have to provide some basic information the DWP use to decide if you meet the basic qualifying conditions, for example age and residency.

If you meet the basic conditions, you are sent a claim form to explain how your condition or impairment affects your daily life, on good and bad days over a range of activities. The completed form and any other evidence you wish to submit, eg. a GP report or hospital letter, should be sent to the DWP within one month. If you have a good reason for needing longer than this, ask the DWP to extend the time limit.

### Action

Phone 0800 917 2222 to start a claim for PIP. It helps if you have the following information to hand: your NI number, bank account details, phone number, GP or other health professional's details and details of any periods (longer than four weeks) spent abroad in the past three years.

## 6.3 How your claim is assessed

The DWP look at your claim form and supporting evidence and decide whether to ask for additional information and/or whether you need to attend a face-to-face assessment with an independent healthcare professional. Most people have to attend an assessment. The DWP must give you seven days' notice of an assessment. The assessments are carried out by a private contractor on behalf of the DWP.

You can take someone with you to the assessment, where you should be given the opportunity to explain your support needs. If you want to be assessed at home, e.g. because you have difficulty travelling, make sure you mention this when you complete the claim form. The assessor may be responsible for gathering other evidence from you and the people or professionals who support you. If you have evidence, such as medical reports, that may help your claim, send them yourself rather than rely on the healthcare professional to ask for it.

A DWP decision maker considers all the evidence and information provided by you and makes a decision on whether you are entitled to PIP, what level you are entitled to and the length of the award.

If, without good reason, you do not provide information required to assess your entitlement to PIP (including if you do not attend and take part in a face-to-face consultation when asked to do so), a decision can be made that you do not qualify for PIP.

## 6.4 Reassessments

Your entitlement to PIP may be reassessed at any time after it has been awarded. If you are awarded PIP for a fixed term, you need to reapply when the award comes to an end. For short awards, the DWP should send you a letter reminding you that you need to contact them on the telephone helpline to make your renewal claim.

## 6.5 Terminal illness

You are considered to be terminally ill if you have a progressive illness that is likely to limit your life expectancy to six months or less. If you are terminally ill, you can claim PIP without the three-month waiting period. It is impossible to say exactly how long someone will live and people who receive PIP under these rules may live longer than six months.

To claim under these rules you need to send a DS1500 doctor's report with your PIP claim. Ask your GP, hospital consultant or specialist nurse for this. The claim can be made by another person on your behalf. You will not have to have a face-to-face assessment.

If you are awarded PIP under these rules, you automatically receive the enhanced rate daily living component. You have to satisfy the conditions for the mobility component in the usual way (as in section 4.2) but the three month requirement will not apply.

## 7 Decisions and payment

You are sent a decision on your claim in writing. The letter includes some information about how the decision was reached.

PIP is normally paid directly into your bank, building society or post office account. It can be paid to an appointee or someone with power of attorney if you are not able to act for yourself. If you are unable to open or manage an account, you can ask for a Simple Payments card which allows you to withdraw your benefits from Paypoint outlets displaying the Simple Payments sign. If you are unable to use any of these methods of payment, contact the DWP.

Payment is normally four weeks in arrears, unless you are terminally ill in which case you are paid weekly in advance.

### 7.1 How long is PIP paid for?

A PIP award can be indefinite but is usually for a fixed period. The length depends on an assessment of how likely your daily living and/or mobility needs may change over time. If you are awarded PIP for a fixed period, you will be invited to reapply before the award comes to an end – typically 12 months before the end of the period.

## 7.2 If you disagree with a decision

If you disagree with a decision about your PIP claim, you can challenge it. You are sent details of how to do this with the decision notice. It is important to challenge a decision or get advice as quickly as possible because there are time limits that usually mean you must act within one month of the decision. You have to ask for a Mandatory Reconsideration before you can lodge an appeal with HM Courts and Tribunals Service.

See factsheet 74, *Challenging welfare benefit decisions*, for more information about reconsiderations and appeals.

## 8 Change of circumstances

The decision letter includes information about your responsibility to inform the DWP of any changes in your circumstances that might affect your claim.

### 8.1 If your condition changes

#### If you are under 65

If you receive PIP and your condition changes so you think you may qualify for a different award, you can ask for your award to be looked at again. This is called a supersession.

You have to satisfy the conditions for an increased award for three months before it can be paid. When you ask for your award to be looked at, the DWP can look at the whole award again and can decide to reduce it, increase it or keep it at the same level. You should seek independent advice on whether you may qualify for a higher rate and how to explain your needs fully before contacting the DWP.

#### If you are 65 or over

You cannot normally start to receive either rate of the mobility component after the age of 65, although you continue to receive it if it was awarded before your 65th birthday. If awarded the standard rate of the mobility component before you reach 65, you cannot move to the enhanced rate if your needs increase after you reach 65.

If awarded the enhanced rate of the mobility component before you reach 65 and your mobility needs reduce to a level that qualifies for the standard rate after 65, you can move to the standard rate (and back to the enhanced rate if your mobility needs increase again within a year).

If you are over 65 and receive the mobility component and you start to have daily living needs or your need for assistance with daily living increases, you can ask for a supersession and qualify for the standard or enhanced rate of the daily living component in the same way as those under 65.

### **Important**

It is a good idea to get independent advice before you contact the DWP to ask for your claim to be looked at again because your PIP might be reduced or stopped altogether. An adviser will be able to tell you whether you might qualify for a higher rate of PIP and how to explain your needs fully.

## **8.2 If the DWP needs more information**

If you report a change in circumstances, the DWP may contact you, your doctor, or someone mentioned on the claim form, to ask for more information or to arrange an assessment by an independent health care professional.

If an appointment is made for a doctor to visit, you may want a friend or relative to be present. This will be particularly important if you have difficulty making yourself understood.

The doctor is not your own doctor but one appointed by the DWP. They will probably examine you and ask further questions. It may be useful to make a note beforehand of the things you want to tell the doctor about the help you need and any difficulties you experience. Some people may be reluctant to admit they have problems or cannot do something, but it is important to give a picture of your normal range of activities – not just the things you can do on a *'good day'*.

## **8.3 Terminal illness**

If you become terminally ill while receiving PIP, you can inform the DWP and ask for your claim to be looked at again under the terminal illness special rules. See section 6.5 for more information.

## **8.4 Hospital and care homes**

Your PIP entitlement can be affected if you are in, or move into, a hospital or care home. If you receive PIP and you go into, or come out of, a hospital or care home you should always notify the DWP.

### **PIP in a hospital**

PIP (both components) is payable for your first 28 days in hospital, if the cost of your care is met by public or local funds. If you have two (or more) inpatient stays separated by an interval of 28 days or less, then the inpatient stays are linked and your PIP stops after you have spent more than 28 days in hospital. You are still paid PIP for the days spent at home in between hospital stays.

PIP can remain in payment indefinitely if it has been awarded under the special rules for terminal illness and you are in a non-NHS hospice.

If you are in an NHS hospital when you claim PIP, you cannot receive it while you are an inpatient. If your claim is successful, you will start receiving it when you go home.

If you are paying for the cost of your care (eg. in a private hospital) you can continue to receive both components of PIP indefinitely.

### **PIP in a care home**

The mobility component of PIP is payable as normal no matter who is funding your fees or how long you remain in a care home. However, it will stop if you are funded by NHS continuing healthcare and you are either in a nursing home or you receive medical treatment in your care home.

Whether or not you can receive the daily living component of PIP depends on how your care home fees are paid. If you pay the full charges in a care home, with or without benefits like Income Support or Pension Credit, you can continue to receive it. This is also the case if you are self-funding but also receiving contributions from the NHS towards nursing care payments.

If the NHS pays all your care home fees, through NHS continuing healthcare funding, you are treated as if you are in hospital and your daily living component will not be paid after 28 days.

If you get local authority funding towards your care home fees, your PIP daily living component stops 28 days after admission (or sooner if you have been in hospital). You retain an 'underlying entitlement' to it, so if you move out of the home you can start to be paid it again. The mobility component remains payable in these circumstances.

If the local authority provides temporary funding that will later be reimbursed by you (for example, under a deferred payment agreement), the daily living component can be paid during the period of temporary funding.

If you have temporary admissions to a home, for example, for respite care funded in full or in part by a local authority or by NHS continuing healthcare funding, your daily living component stops after 28 days. If these are less than 28 days, they can be linked or added together to reach the 28 day limit. If you need regular periods of respite care in a care home, it may be possible to plan these so that your PIP is not affected. Seek advice if this applies to you.

### **Action**

For more information on living in a care home please see our other factsheets on care and care homes. In Scotland, contact Age Scotland for information about how PIP and free personal and nursing care work together. NHS continuing healthcare funding is no longer available for funding a place in a care home for new assessments.

## 8.5 Prisoners

Generally, neither component of PIP is payable after 28 days in prison or legal custody.

## 8.6 Going abroad

If you go abroad temporarily and intend to return within 52 weeks, your PIP entitlement continues for 13 weeks. If you are going abroad specifically to receive medical treatment, PIP can continue for 26 weeks.

Different rules apply to members of the armed forces and their families, aircraft workers and mariners.

### Exporting PIP

Sometimes the daily living component of PIP can be paid if you leave the UK to live in another EEA state or Switzerland. You may be able to make a claim for the daily living component from another EEA state or Switzerland if you have a genuine and sufficient link to the UK social security system.

For further information and/or to request a claim form write to: Exportability Co-ordinator, Room B201, Pension, Disability and Carers Service, Warbreck House, Warbreck Hill Road, Blackpool FY2 OYE or email [exportability.team@dwp.gsi.gov.uk](mailto:exportability.team@dwp.gsi.gov.uk). There is more information online at [Gov.uk/pip](http://Gov.uk/pip) or you can seek advice from a local Age UK or another independent organisation.

## 9 PIP and other benefits

### 9.1 Overlapping benefits

You cannot get PIP at the same time as DLA, AA or Armed Forces Independence Payment. Constant AA, which is paid with Industrial Injuries Disablement Benefit and War Disablement Pensions, overlaps with PIP daily living component. War pensioners' mobility supplement overlaps with PIP mobility component. If you qualify for two overlapping benefits, you are paid whichever is higher.

### 9.2 Means-tested benefits

Income from PIP is ignored in the calculation of means-tested benefits including Pension Credit, Income Support, income-related ESA, income-based JSA, Housing Benefit, Tax Credits and Universal Credit.

Entitlement to PIP may help you get a higher amount of means-tested benefits. For example, you could receive the 'severe disability addition' of Pension Credit.

If someone in your household receives PIP, you are exempt from the benefit cap that limits the amount of benefits a working age household can get.

Age UK has a number of factsheets about means-tested benefits: factsheet 48, *Pension Credit*; factsheet 17, *Housing Benefit* (for people over Pension Credit qualifying age); and factsheet 56, *Benefits for people under Pension Credit age*. In Wales, also see Age Cymru factsheet 21w, *Council Tax* and the equivalent in Scotland.

### 9.3 Council Tax

If you have a severe mental impairment and you are awarded either rate of the daily living component of PIP, you may be entitled to a Council Tax discount or exemption. A severe mental impairment could be a learning disability, mental illness or a condition like dementia. Ask your local authority for details of the scheme available in your area.

### 9.4 Benefits for carers

If you are awarded the daily living component of PIP and you have a carer, they may be entitled to claim Carer's Allowance, or NI credits.

#### Note

See factsheet 55, *Carer's Allowance*, for more information, and seek advice to check if claiming could affect your other benefits.

### 9.5 Other benefits

If you qualify for PIP, you qualify for a £10 Christmas bonus

If awarded 8 points or more under mobility activity 2 '*moving around*' you automatically qualify for a Blue Badge parking permit. This allows parking with some limitations but usually without charge at meters or where waiting is restricted

If awarded 8 points or more under mobility activity 2 '*moving around*' or activity 7 '*communicating verbally*' you automatically qualify for a concessionary travel pass (any award of PIP in Scotland qualifies for the equivalent travel pass).

If awarded enhanced rate mobility component you can apply for a contract-hire or hire-purchase car, powered wheelchair or mobility scooter through the Motability Scheme

If awarded enhanced rate mobility component you can get an exemption from road tax (Vehicle Excise Duty) or a 50% discount if you receive the standard rate mobility component

See information guide *In the driving seat* for more information.

## 10 Disability Living Allowance

### 11 What is DLA?

DLA is a similar benefit to PIP and has been replaced for new claimants aged 16-64. It will remain available for children aged under 16 for the time being. This section is for people who are existing DLA claimants and looks at what the changes mean. Current rates for 2017/18:

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#### Care component

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Higher	£83.10
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Middle	£55.65
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Lower	£22.00
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#### Mobility component

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Higher	£58.00
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Lower	£22.00
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### 12 Reassessing existing DLA claimants for PIP

Between now and 2018, the DWP are reassessing DLA claimants for PIP depending on what your age was on 8 April 2013.

#### 12.1 If you were under 65 on 8 April 2013

If you already get DLA and were under 65 on 8 April 2013, the reassessment applies to you. When selected, you are told your DLA claim is going to end and you are invited to make a claim for PIP, even if your DLA was awarded indefinitely. DWP are randomly selecting people who have an indefinite or fixed-term award of DLA for reassessment. You are also invited to claim PIP if you report a change or circumstances on your DLA claim.

When invited, you must contact the DWP within four weeks to start your new PIP claim. The DWP take your basic details and send you a claim form. You have four weeks to send this back, although the DWP can give you longer if you have a good reason for needing an extension. Unless the deadline is extended, your DLA payments stop if you do not make a PIP claim within four weeks.



### **Note**

If you receive a letter, it is important you act as soon as possible as if you miss the four week window your DLA payments stop. If this happens, if you make a PIP claim within a further four weeks, your DLA goes back into payment while your PIP claim is assessed. If you do not claim PIP, your DLA stops and there is no further opportunity to get it reinstated.

When you claim PIP, your DLA payments continue while you are being assessed. If awarded PIP, your DLA continues for four weeks after your next payment date, and then your PIP claim starts. If you are refused PIP, your DLA continues for four weeks and then stops.

## **12.2 If you were 65 or over on 8 April 2013**

If you receive DLA and reached the age of 65 by 8 April 2013, the reassessment does not apply to you. You remain on DLA as long as you continue to satisfy the eligibility conditions.

## **13 Change of circumstances**

### **13.1 If your condition changes**

#### **If you were under 65 on 8 April 2013**

If you receive a lower rate of a DLA component and your condition deteriorates so you may qualify for a higher rate, you can ask for your case to be reconsidered. This means you are reassessed for PIP. As PIP has no equivalent of low rate care component, you may lose this and once the PIP claim starts it cannot be stopped or reversed.

### **Important**

It is a good idea to get independent advice before you contact the DWP to ask for your claim to be looked at again. An adviser can tell you whether you may qualify for a higher rate of benefit and also how to explain your needs fully to the DWP.

#### **If you were 65 or over on 8 April 2013**

If your condition changes, you cannot start to receive low rate care component for the first time but you can start to receive or move to the middle or high rate. For example, if you receive middle rate care but you now need help day and night, you can apply for the higher rate. You have to satisfy the conditions for six months before your rate can be increased.

You cannot normally be awarded either rate of the mobility component for the first time. Nor can you move from lower rate mobility to higher rate mobility after the age of 65. The only exception is if:

- you already receive DLA, and
- you can show you met the qualifying conditions for the new award before you were 65, and
- the relevant medical conditions did not happen since your 65th birthday.

You need to contact the AA rather than the DLA helpline.

### **13.2 If the DWP needs more information**

The same rules apply as for PIP, see section 8.2.

### **13.3 Terminal illness**

The same rules apply as for PIP, with daily living component the same as DLA care component, see section 8.3.

### **13.4 Hospital and care homes**

The same rules apply as for PIP, with daily living component the same as DLA care component, see section 8.4.

### **13.5 Prisoners**

Generally, DLA is not payable after 28 days in prison or legal custody.

### **13.6 Going abroad**

The same rules apply as for PIP, with daily living component the same as DLA care component, see section 8.6. If you move to another EEA country or Switzerland, only the DLA care component can be exported.

### **13.7 If you disagree with a decision**

If you disagree with a DWP decision, you can challenge it. It is important to take action as quickly as possible because there are time limits that generally mean you must take action within one month of the decision. You have to ask for a Mandatory Reconsideration before you can lodge an appeal with HM Courts and Tribunals Service.

See factsheet 74, *Challenging welfare benefit decisions*, for more information about reconsiderations and appeals.

## 14 DLA and other benefits

The same rules apply as for PIP, with daily living component the same as DLA care component, see section 9.

## 15 PIP Activities, descriptors and points

See section 4 for more information about how these are worked out.

### Daily living activities

Activity	Descriptors	Points
1. Preparing food	a. Can prepare and cook a simple meal unaided	0
	b. Needs to use an aid or appliance to be able to either prepare or cook a simple meal	2
	c. Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave	2
	d. Needs prompting to be able to either prepare or cook a simple meal	2
	e. Needs supervision or assistance to either prepare or cook a simple meal	4
	f. Cannot prepare and cook food	8
2. Taking nutrition	a. Can take nutrition unaided	0
	b. Needs –	2
	(i) to use an aid or appliance to be able to take nutrition; or	
	(ii) supervision to be able to take nutrition; or	
	(iii) assistance to be able to cut up food	
	c. Needs a therapeutic source to be able to take nutrition	2
d. Needs prompting to be able to take nutrition	4	
e. Needs assistance to be able to manage a therapeutic source to take nutrition	6	
f. Cannot convey food and drink to their mouth and needs another person to do so	10	
3. Managing therapy or monitoring a	a. Either –	0
	(i) does not receive medication, therapy or need to monitor a health condition; or	

health condition	(ii) can manage medication or therapy or monitor a health condition unaided	
	b. Needs either –	1
	(i) to use an aid or appliance to be able to manage medication; or	
	(ii) supervision, prompting or assistance to be able to manage medication or monitor a health condition	
	c. Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week	2
	d. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week	4
	e. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week	6
	f. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week	8
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4. Washing and bathing	a. Can wash and bathe unaided	0
	b. Needs to use an aid or appliance to be able to wash or bathe	2
	c. Needs supervision or prompting to be able to wash or bathe	2
	d. Needs assistance to be able to wash either their hair or body below the waist	2
	e. Needs assistance to be able to get in or out of a bath or shower	3
	f. Needs assistance to be able to wash their body between the shoulders and waist	4
	g. Cannot wash and bathe at all and needs another person to wash their entire body	8
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5. Managing toilet needs or incontinence	a. Can manage toilet needs or incontinence unaided	0
	b. Needs to use an aid or appliance to be able to manage toilet needs or incontinence	2
	c. Needs supervision or prompting to be able to manage toilet needs	2

	d. Needs assistance to be able to manage toilet needs	4
	e. Needs assistance to be able to manage incontinence of either bladder or bowel	6
	f. Needs assistance to be able to manage incontinence of both bladder and bowel	8
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6. Dressing and undressing	a. Can dress and undress unaided	0
	b. Needs to use an aid or appliance to be able to dress or undress	2
	c. Needs either –	2
	(i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed; or	
	(ii) prompting or assistance to be able to select appropriate clothing	
	d. Needs assistance to be able to dress or undress lower body	2
	e. Needs assistance to be able to dress or undress upper body	4
	f. Cannot dress or undress at all	8
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7. Communicating verbally	a. Can express and understand verbal information unaided	0
	b. Needs to use an aid or appliance to be able to speak or hear	2
	c. Needs communication support to be able to express or understand complex verbal information	4
	d. Needs communication support to be able to express or understand basic verbal information	8
	e. Cannot express or understand verbal information at all even with communication support	12
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8. Reading and understanding signs, symbols and words	a. Can read and understand basic and complex written information either unaided or using spectacles or contact lenses	0

b. Needs to use an aid or appliance, other than spectacles or contact lenses, to be able to read or understand either basic or complex written information	2
c. Needs prompting to be able to read or understand complex written information	2
d. Needs prompting to be able to read or understand basic written information	4
e. Cannot read or understand signs, symbols or words at all	8

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9. Engaging with other people face to face	a. Can engage with other people unaided	0
	b. Needs prompting to be able to engage with other people	2
	c. Needs social support to be able to engage with other people	4
	d. Cannot engage with other people due to such engagement causing either – (i) overwhelming psychological distress to the claimant; or (ii) the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person	8

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10. Making budgeting decisions	a. Can manage complex budgeting decisions unaided	0
	b. Needs prompting or assistance to be able to make complex budgeting decisions	2
	c. Needs prompting or assistance to be able to make simple budgeting decisions	4
	d. Cannot make any budgeting decisions at all	6

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### Mobility activities

Activity	Descriptors	Points
1. Planning and following	a. Can plan and follow the route of a journey unaided	0

journeys	b. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant	4
	c. For reasons other than psychological distress, cannot plan the route of a journey	8
	d. For reasons other than psychological distress, cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid	10
	e. Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant	10
	f. For reasons other than psychological distress, cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid	12
	<hr/>	
2. Moving around	a. Can stand and then move more than 200 metres either aided or unaided	0
	b. Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided	4
	c. Can stand and then move unaided more than 20 metres but no more than 50 metres	8
	d. Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres.	10
	e. Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided	12
	f. Cannot, either aided or unaided, – (i) stand; or (ii) move more than 1 metre.	12
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## Useful organisations

### **Action for Blind People**

[www.actionforblindpeople.org.uk](http://www.actionforblindpeople.org.uk)

Telephone 0303 123 9999

Charity providing free and confidential support for blind and partially sighted people in all aspects of their lives.

### **Action on Hearing Loss**

[www.actiononhearingloss.org.uk](http://www.actiononhearingloss.org.uk)

Telephone 0808 808 0123

Provides information and support for deaf and hard-of-hearing people.

### **Alzheimer's Society**

[www.alzheimers.org](http://www.alzheimers.org)

Telephone 0300 222 1122

Offers advice, information and support in England and Wales to people with dementia, their families and carers through its helpline and local branches.

### **Arthritis Care**

[www.arthritiscare.org.uk/](http://www.arthritiscare.org.uk/)

Telephone 0808 800 4050

Charity with a factsheet *Claiming Attendance Allowance* with advice on filling in the form.

### **British Lung Foundation**

[www.blf.org.uk](http://www.blf.org.uk)

Telephone 0300 003 0555

Provides information if you have chest problems and breathing difficulties.

### **Carers Trust**

[www.carers.org](http://www.carers.org)

Telephone 0844 800 4361

Offers practical help and assistance to carers.

### **Carers UK**

[www.carersuk.org](http://www.carersuk.org)

Telephone 0808 808 7777

Provides information and support for carers, including information about benefits.



### **Carers Wales**

[www.carerswales.org](http://www.carerswales.org)

Telephone 029 20 811370

### **Citizens Advice**

England or Wales go to [www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)

Northern Ireland go to [www.citizensadvice.co.uk](http://www.citizensadvice.co.uk)

Scotland go to [www.cas.org.uk](http://www.cas.org.uk)

In England telephone 0344 411 1444

In Wales telephone 0344 477 2020

In Scotland telephone 0808 800 9060

National network of advice centres offering free, confidential, independent advice, face to face or by telephone.

### **Dementia UK**

[www.dementiauk.org](http://www.dementiauk.org)

Telephone 0800 888 6678

Works to improve the quality of life of dementia patients and their carers. In some areas it provides Admiral Nurses who are specialist in dementia that can support you at home.

### **DIAL UK**

[www.scope.org.uk/dial](http://www.scope.org.uk/dial)

Telephone 0808 800 3333

Independent network of local disability information and advice services run by and for disabled people in conjunction with Scope.

### **Disability Benefits Helpline**

[www.gov.uk/disability-benefits-helpline](http://www.gov.uk/disability-benefits-helpline)

DWP helpline providing advice or information about any claim for Disability Living Allowance, Personal Independence Payment or Attendance Allowance that you have already made.

### **Attendance Allowance (AA)**

Telephone 0345 605 6055

### **Disability Living Allowance (DLA)**

If you were born on or before 8 April 1948

Telephone 0345 605 6055

If you were born after 8 April 1948

Telephone 0345 712 3456

### **Personal Independence Payment helpline**

Telephone 0345 850 3322

**Disability Law Service**

[www.dls.org.uk](http://www.dls.org.uk)

Telephone 020 7791 9800

Provides free, confidential legal advice to disabled adults, their families and carers.

**Disability Rights UK**

[www.disabilityrightsuk.org](http://www.disabilityrightsuk.org)

Telephone 020 7250 8181

Promotes meaningful independent living for disabled people; disabled people's leadership and control; breaking the link between disability and poverty; and campaigning for disability equality and human rights.

**Gov.uk**

[www.gov.uk](http://www.gov.uk)

Official website for government information and services. Includes information about pensions planning, the State Pension, workplace pensions, and personal and stakeholder pensions.

**Macmillan**

[www.macmillan.org.uk](http://www.macmillan.org.uk)

Telephone 0808 808 0000

Provides up-to-date cancer information, practical advice and support for cancer patients, their families and carers.

**Mencap**

[www.mencap.org.uk](http://www.mencap.org.uk)

Telephone 0808 808 1111

Charity for people with learning disabilities and their families

**Mind**

[www.mind.org.uk](http://www.mind.org.uk)

Telephone 0300 123 3393

Provides information and advice for people with mental health problems.

**Mobility**

[www.motability.co.uk](http://www.motability.co.uk)

Telephone 0300 456 4566

**Parkinson's UK**

[www.parkinsons.org.uk](http://www.parkinsons.org.uk)

Telephone 0808 800 0303

Charity providing support, advice and information for people with Parkinson's Disease, their carers, family and friends.

**Royal National Institute of Blind People (RNIB)**

[www.rnib.org.uk](http://www.rnib.org.uk)

Telephone 0303 123 9999

Charity offering information and advice for people with sight problems.

**Stroke Association**

[www.stroke.org.uk](http://www.stroke.org.uk)

Telephone 0303 303 3100

Provides community support in some areas and provides patient leaflets for people affected by stroke.

**Veterans UK**

[www.gov.uk/government/organisations/veterans-uk](http://www.gov.uk/government/organisations/veterans-uk)

Telephone 0800 1914 218

Administers the armed forces pension schemes and compensation payments for those injured or bereaved through service.

## Age UK

Age UK provides advice and information for people in later life through our Age UK Advice line, publications and online. Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

### Age UK Advice

[www.ageuk.org.uk](http://www.ageuk.org.uk)

0800 169 65 65

Lines are open seven days a week from 8.00am to 7.00pm

### In Wales contact

#### Age Cymru

[www.agecymru.org.uk](http://www.agecymru.org.uk)

0800 022 3444

### In Northern Ireland contact

#### Age NI

[www.ageni.org](http://www.ageni.org)

0808 808 7575

### In Scotland contact

#### Age Scotland

[www.agescotland.org.uk](http://www.agescotland.org.uk)

0800 12 44 222

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